EDWARD J. MARKEY

7TH DISTRICT, MASSACHUSETTS www.house.gov/markey

ENERGY AND COMMERCE COMMITTEE

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## Congress of the United States

House of Representatives Washington, DC 20515-2107

2108 RAYBURN BUILDING WASHINGTON, DC 20515-2107 (202) 225-2836

DISTRICT OFFICES:

5 HIGH STREET, SUITE 101 MEDFORD, MA 02155 (781) 396–2900

188 CONCORD STREET, SUITE 102 FRAMINGHAM, MA 01702 (508) 875–2900

December 6, 2001

Governor Howard Dean, M.D. 109 State Street, Pavilion Montpelier, VT 05609-0101

Dear Governor Dean:

I write to encourage you to consider stockpiling potassium iodide as part of Vermont's overall emergency planning in the event of a nuclear incident and to clarify some misleading statements being made by public health officials about the value of such stockpiles. Potassium iodide works by flooding the thyroid gland with stable iodine so that the gland does not take up radioactive iodine, a fission byproduct of nuclear power plants. Children are the most vulnerable to radiation-induced thyroid diseases because their thyroid glands are very active.

In a December 4, 2001 edition of *All Things Considered*, National Public Radio reporter Richard Harris interviewed several public health officials, including Vermont Health Commissioner Jan Carney. Dr. Carney stated that Vermont officials are considering potassium iodide stockpiling as an "additional step" along with evacuation and sheltering in preparing for the accidental or terrorist-related release of radioactivity from a nuclear reactor.

I couldn't agree more that potassium iodide is appropriate as part of a comprehensive emergency plan. In fact, there is strong consensus among the World Health Organization, the American Thyroid Association, the Department of Health and Human Services, the Food and Drug Administration, the Federal Emergency Management Agency and the Nuclear Regulatory Commission on this issue.

The safety and efficacy of potassium iodide was formally established as a matter of Federal policy on December 15, 1978, when the Food and Drug Administration concluded that potassium iodide is a safe and effective means by which to block uptake of radioactive iodine by the thyroid gland in a radiological catastrophe, and approved its over-the-counter sale. In January 2001, the Nuclear Regulatory Commission found that potassium iodide is "a reasonable, prudent, and inexpensive supplement to evacuation and sheltering for specific local conditions."

Yet misinformation about potassium iodide continues to delay its distribution to the citizens who would need it. Some argue against the need for potassium on the grounds that it only protects against radioactive iodine, which is just one of the many radioactive isotopes that would be released in a reactor accident. While this is true, radioactive iodine

is particularly dangerous due to its high volatility, which allows it to travel farther from the point of release than less volatile isotopes, and its intermediate half-life, which allows it to persist in radioactive form for days. Most other isotopes either don't travel far from the plant or decay to stable, nonradioactive forms within seconds. Another argument is that potassium iodide only protects one organ in the body—the thyroid gland. But the thyroid gland is the most radiation-sensitive organ in the entire body. Fifteen years after the Chernobyl accident, a host of studies have revealed no other long-term health consequence of the accident *except* thousands of additional cases of thyroid disease.

Some public health officials are concerned that providing potassium iodide will not protect people as well as sheltering or evacuating the affected area. Of course potassium iodide is not a magic pill, but it is misleading and inaccurate to deny its value as an adjunct to evacuation and sheltering. Since potassium iodide must be taken before or within a few hours after exposure, it is prudent to have it available so that people are protected in the conceivable event that evacuation is delayed due to traffic or weather conditions.

In recent testimony before the House Energy and Commerce Committee, the U.S. Secretary of Health and Human Services noted that he was including potassium iodide in the chemical antidotes to terrorist threats for which he had requested \$47 million from President Bush, and that he is considering including potassium iodide as part of the Department of Health and Human Services' "push packs". Furthermore, he agreed with my suggestion to stockpile potassium iodide in schools near nuclear power plants, saying it had "a great deal of merit."

It is now possible for Vermont to proceed with stockpiling potassium iodide using federal funds. In January of this year, the Nuclear Regulatory Commission agreed to fund such stockpiles to those states that request it. Thus, Vermont children could be protected from the lifelong consequences of thyroid diseases if you ask for potassium iodide. I urge you, as both Governor of Vermont and a physician with a special interest in children's health, to work with Dr. Jan Carney to provide potassium iodide to all Vermont residents in the vicinity of a nuclear power plant.

Sincerely,

Edward J. Markey

Member of Congress